

SEP 14 2004

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From Christopher J. Rourk 214-939-8657

Client/Matter Number 13634.0001/015351-0001 B69465

Comments

In re Application of: William Rex Akers
Serial No. 09/851,745
Filing Date: 05/09/2001
Group Art Unit: 3626
Examiner: Robert Morgan
Title: System and Method for Electronic Medical File Management

Attached for official filing under 37 CFR 3.73 (b), please find:

PTO/SB/82 (1 page); and,
PTO/SB/96 (1 page);

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PTO/SB/96 (06-04)

Approved for use through 07/31/2008. OMB 0651-0031

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Healthcare Vision, Inc.Application No./Patent No.: 09/851,745 Filed/Issue Date: 05/09/2001Entitled: System and Method for Electronic Medical File Management

Healthcare Vision, Inc., a corporation
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
 The extent (by percentage) of its ownership interest is _____ %
 in the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: William Rex Akers To: Healthcare Computer Corporation
 The document was recorded in the United States Patent and Trademark Office at
 Reel 011780, Frame 0524, or for which a copy thereof is attached.
2. From: Healthcare Computer Corporation To: Healthcare Vision, Inc.
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

9-10-04
 Date
817-531-8992
 Telephone number

Tracy Good
 Typed or printed name
[Signature]
 Signature

Executive Vice President Sec-Tec
 Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/02 (09-03)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/851,745
Filing Date	05/09/2001
First Named Inventor	William Rex Akers
Art Unit	3626
Examiner Name	Robert Morgan
Attorney Docket Number	15351-0001(B69465)13634.0001

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

33649

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

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OR

☐ Firm or
Individual Name

Address

Address

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State

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name Tracy Ward

Signature

Date

9-10-04

Telephone

817-531-8992

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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